Passenger Commercial Domage Private Passenger Commercial Domage Private Passenger Commercial Domage Private Passenger Commercial Domage Private Passenger Domage Commercial Domage Domag	n 754.EXHIBIT A Summary Sheet	-	DIVISION OF LLINOIS
hange in Company's premium or rate level produced by rate revisited, ILLING SPRINGFRED, I	F	ORM (RF-3)	STATE CH.
hange in Company's premium or rate level produced by rate revision. ILLING SPRINGFRD. ILLING SPRINGFRD		, t	JAN .
Annual Premium Percent Coverage Volume (Illinois)* Percent Change (+ or -)**  Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Automobile Physical Damage Automobile Physical Physical Damage Automobile Physical Damage Automobile Physical Physical Damage Automobile Physical Ph	There is Company to recomism of	! ! heavyborn favol orca	L nata revision o ILLING
Annual Premium Percent Coverage Volume (Illinois)* Percent Change (+ or -)**  Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Automobile Physical Damage Automobile Physical Physical Damage Automobile Physical Damage Automobile Physical Physical Damage Automobile Physical Ph	ffective 02/04/2008		SPRINGFIELD
Annual Premium Percent Coverage Volume (Illinois)* Change (+ or -)**  uutomobile Liability Private Passenger Commercial Uutomobile Physical Damage Private Passenger Commercial Uutomobile Physical Damage Private Passenger Commercial Iability Other Than Auto Uurglary and Theft United	(1)	(2)	(3)
Description of filing. (If filing follows rates of an advisory consumercial methodes and seach sectional factor, brichoods base dase premiums for all prior rate changes.  ***Change in Company's premium level which will result from application of new rates.    O.00%   O.	<b>V</b> -7		
Passenger Commercial Untomobile Physical Damage Private Passenger Commercial Jability Other Than Auto Ouglary and Theft Unglary and	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
Commercial Damage Private Passenger Commercial 0.00% Liability Other Than Auto 0.00% Lirglary and Theft 0.00% Lidglary and Theft 0.00% Lidglary and Theft 0.00% Lidglary and Theft 0.00% Lidglary and Machinery 0.00% Lidglary 0.00% Li	utomobile Liability Private		
Description of filing. (If filing follows rates of an advisory organization, specify organization):  Revise description of filing. (If filing follows rates of an advisory organization, specify organization): Revise description of filing. (If filing follows rates of an advisory organization, specify organization): Revise description of filing. (If filing follows rates of an advisory organization, specify organization): Revise description of filing. (If filing follows rates of an advisory organization, specify organization): Revise description of filing. (If filing follows rates of an advisory organization, specify organization): Revise description of filing. (If filing follows rates of an advisory organization, specify organization): Revise description of filing. (If filing follows rates of an advisory organization, specify organization): Revise description of filing. (If filing follows rates of an advisory organization, specify organization): Revise description of filing. (If filing follows rates of an advisory organization, specify organization): Revise description of filing follows rates of an advisory organization organization, specify organization): Revise description of filing follows rates of an advisory organization organization, specify organization): Revise description of filing follows rates of an advisory organization organization, specify organization): Revise description of filing follows rates of an advisory organization organization, specify organization organizat			0.00%
Private Passenger Commercial			0.00%
Commercial  Iability Other Than Auto  Surglary and Theft  O.00%  Islass  Islass  O.00%  Islass  O.00%  Islass  Islass  O.00%  O.00%  O.00%  O.00%  O.00%  O.00%  O.00%  Islass  O.00%  Islass  O.00%			
Ammed Forces Insurance Exchange    Company   Company   Company		·····	
large and Theft    100%   0.00			
Itlass Ideality Ideal	lability Other Than Auto		
Ideality Furety			
Sire and Machinery 0.00%			
coiler and Machinery ire 0.00%  Interest 0.00% Interest 0.00% Interest 0.00% Indextowers Interest 0.00% Interes		<del></del>	
ire xtended Coverage		<del>-11.2-12.2-12.2-12.2-12.2-12.2-12.2-12.</del>	
Attended Coverage Inland Marine Inland Marine Indexwers Indexwers Indexwers Indexwers Index Inde			
Inland Marine Iomeowners Iomercial Multi-Peril Icrop Hail Ioher Life of Insurance Ioles filing only apply to certain territory (territories) or certain Classes? If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revise base class premiums for all forms, revise deductible factors form then the color, so your start in the color of the color forms the color for	· · ·		
Interport   15,825   0.77%   0.00%   0		<del></del>	<del></del>
Ones filing only apply to certain territory (territories) or certain classes? If so, specify:  No  Strief description of filing. (If filing follows rates of an advisory organization, specify organization):  Revise base class premiums for all forms, revise deductible factors form forms HO 00 02, 03 d 03w/15, revise 88, 9 & 10 Frame and 8, 88 & 9 Masonry factors for forms HO 00 02, 03 d 03w/15, revise allemate water supply oradits, policy size relativities and each additional factor, introduce base class premiums for form HO 00 04, introduce Identity Fraud coverage, revise earthquake territories. This follows w/ ISO Ref. # HO-2007-FLA1.  **Adjusted to reflect all prior rate changes.  ***Change in Company's premium level which will result from application of new rates.  Armed Forces Insurance Exchange  Name of Company  FILED  MAR 1 7 19		415 B25	
Crop Hail O.00%  Cife of Insurance  Coes filing only apply to certain territory (territories) or certain Classes? If so, specify: NO  Crief description of filing. (If filing follows rates of an advisory organization, specify organization): Revise base class premiums for all forms, revise deductible factors form forms HO 00 02  O3, O3 w/15. revise 8B, 9 & 10 Frame and 8, BB & 9 Mesonry factors for forms HO 00 02, O3 & O3 w/15. revise alternate water supply credits, policy size relativities and each additional factor, introduce base class premiums for form HO 00 04, introduce identity Fraud coverage, revise eathquake territories. This follows w/ ISO Ref. # HO-2007-RLA1.  **Adjusted to reflect all prior rate changes.  ***Change in Company's premium level which will result from application of new rates.  **Armed Forces Insurance Exchange  Name of Company  **MAR 1 7 19			
Does filing only apply to certain territory (territories) or certain classes? If so, specify: NO  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revise base class premiums for all forms, revise deductible factors form tho 00 02 03, 03 w/15, revise 8B, 9 & 10 Frame and 8, 8B & 9 Mesonry factors for forms HO 00 02, 03 & 03w/15, revise alternate water supply credits, policy size relativises and each additional factor, introduce base class premiums for form HO 00 04, Introduce Identity Fraud coverage, revise earthquake territories. This follows w/ ISO Ref. # HO-2007-RLA1.  **Adjusted to reflect all prior rate changes.  ***Change in Company's premium level which will result from application of new rates.  Armed Forces Insurance Exchange    Company   FILED   MAR 1 7 19			
Life of Insurance  Does filing only apply to certain territory (territories) or certain classes? If so, specify: NO  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revise base class premiums for all forms, revise deductible factors form forms HO 00 02, 03 & 03 w/15, revise 8B, 9 & 10 Frame and 8, 8B & 9 Mesonry factors for forms HO 00 02, 03 & 03 w/15, revise alternate water supply credits, policy size relativities and each additional factor, introduce base class premiums for form HO 00 04, introduce identity Fraud coverage, revise earthquake territories. This follows w/ ISO Ref. # HO-2007-RLA1.  *Adjusted to reflect all prior rate changes.  **Change in Company's premium level which will result from application of new rates.  Armed Forces Insurance Exchange    Company   FILED   MAR 1 7 19	Other	<del>-1</del>	0.00%
onganization, specify organization):  Revise base class premiums for all forms, revise deductible factors form forms HO 00 02  03,03 w/15, revise 8B, 9 & 10 Frame and 8, 8B & 9 Mesonry factors for forms HO 00 02, 03 & 03w/15, revise alternate water supply credits, policy size relativities and each additional factor, introduce base class premiums for form HO 00 04, introduce Identity Fraud coverage, revise earthquake territories. This follows w/ ISO Ref. # HO-2007-RLA1.  **Adjusted to reflect all prior rate changes.  **Change in Company's premium level which will result from application of new rates.  **Armed Forces Insurance Exchange  Name of Company  MAR 1 7 19	Does filing only apply to cen	-	ories) or certain
*Adjusted to reflect all prior rate changes.  **Change in Company's premium level which will result from application of new rates.  Armed Forces Insurance Exchange    Name of Company   FILED	organization, specify organi 03, 03 w/15, revise 8B, 9 & 10 Frame and 8, 8B & 9 Masonry fact	Zation): Revise base class premiums for one for forms HO 00 02, 03 & 03w/15, revise alternate	all forms, revise deductible factors form forms HO 00 02 water supply credits, policy size relativities and each
**Change in Company's premium level which will result from application of new rates.  Armed Forces Insurance Exchange    Name of Company FILED			
Name of Company Filed MAR 1 7 19	**Change in Company's premiu	ior rate changes. m level which will resu *.	It from application of
Name of Company Filed MAR 1 7 19		Armed Forces Insurar	ce Exchange
			MAR 1 7 19
DAA IA			SOS - ISU - COD

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	02/04/08
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine	COS 740	-6.8%
12. Homeowners	\$695,718	-0.070
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Line of histiance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	
Brief description of filing. (If filing followant Homeowners with Auto	ws rates of an advisory organization, spec	cify organization): <u>Portfolio Discount:</u>
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	which will result from application of new rates	mnity Insurance Company
		Name of Company
		and the state of t
	Fra	an Muldoon, AVP
		Official - Title

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### **ILLINOIS DEPARTMENT OF INSURANCE**

#### **SUMMARY SHEET**

Change in Company's premium or rate le	vel produced by rate revision effective	02/04/08
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage     Private Passenger Commercial		
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine	047 000 CC0	
12. Homeowners	\$17,882,552	-5.5%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Line of insurance		
Does filing only apply to certain territory (	territories) or certain classes? If so, specify:	
Brief description of filing. (If filing follow Homeowners with Auto	vs rates of an advisory organization, spec	ify organization): Portfolio Discount
	· · · · · · · · · · · · · · · · · · ·	
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hìch will rēsult from application of new rates.	
	Chubb Nati	onal Insurance Company
		lame of Company
	יו	ато от фотрату
	Fra	n Muldoon, AVP
		Official – Title

New Discount



#### **SUMMARY SHEET**

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or - )**
	Automobile Liability		
	Private Passenger		
	Commercial Automobile Physical Damage		
	Private Passenger		DANCE
	Commercial		OF THE SHIDEPA
	Liability Other Than Auto		DIVISITE OF ILLIAND
	Burglary and Theft		SECONO
	Glass		DEC 2 0 2007
	Fidelity	·	DEC
	Surety		- HUNOIS
	Boiler and Machinery		SPHINGFIELD, ILLINOIS
	Fire	- · · · · · · · · · · · · · · · · · · ·	· SPI
	Extended Coverage Inland Marine		
	Homeowners	\$ 17,483,721	+4.0%
· ·	Commercial Multi-Peril	Ψ 17,400,721	14.076
	Crop Hail		
j.	Other		
•	Line of Insurance		
	Does filing only apply to certain If so, Specify:	territory (territories) or cert	ain classes? No
	Brief description of filing. (If filing	follows rates of an adviso	ory organization.
	specify organization):		ge.
	· · · · · ·		<u> </u>
	Includes changes to base	rates and tier factors.	

\*\* Change in company's premium level which will result from application of new rates.

Erie Insurance Exchange Name of Company

Ross Fonticella, ACAS

Actuarial

#### **SUMMARY SHEET**

•	Change in Company's premium or ra	ate level produced by rate revision effective	1/16/2008
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	WOURANCE	
2	Commercial	OIVISION OF THE BUILDING	
3. 4.	Liability Other Than Auto	STATE	
4. 5.	Burglary and Theft Glass	2008	
6.	Fidelity	JAN 2 2 2008	
7.	Surety		
8.	Boiler and Machinery	SPRINGFIELD, ILLINOIS	
9.	Fire	SPRINGFIELD, 1	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$5,338,193	15.6%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does fi	ling only apply to certain territory (	territories) or certain classes? If so, specify:	
Base	rate changes apply to all territories a	and classes	
	ode rate changes apply to zip code 6		
Brief d Revis	escription of filing. (If filing followion to base rates	s rates of an advisory organization, specify o	organization):
_	ion to zip code factors		<del></del>
** Ch	justed to reflect all prior rate change ange in Company's premium level v ult from application of new rates.		
	*		
	D # 412 0803	Farmer	s Insurance Exchange
		1000	Name of Company
	.2.	.10	
	_ <b>c</b> () >		
	()°	Inchus	Taub - Product Manager
	المار الم	Joshua	Official - Title
129219	D X H		Omorai - Title

### ILLINOIS DEPARTMENT OF INSURANCE

#### **SUMMARY SHEET**

Change in Company's premium	or rate level produced by rate revision effective	02/04/08
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
<ol> <li>Automobile Physical Damag Private Passenger Com</li> </ol>		
Liability Other Than Auto		
4. Burglary and Theft	<del></del>	
5. Glass		
6. Fidelity	<del></del>	
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$4,042,929	-2.6%
13. Commercial Multi-Peril		
14. Crop Hail		
15. OtherLine of Insurance		
Line of insurance		
Does filing only apply to certain t	territory (territories) or certain classes? If so, specify: _	
_ coog c.m, app., to contain.		
Brief description of filing. (If fil :Homeowners with Auto	ing follows rates of an advisory organization, specif	y organization): <u>Portfolio Discount</u>
*Adjusted to reflect all prior rate **Change in Company's premiur	m level which will result from application of new rates.	nsurance Company
		me of Company
	_	AN Life of AN CD
		Muldoon, AVP Official - Title
	•	Unicial – Title

New Discount

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

JAN 1 0 2008

SPRINGFIELD, ILLINOIS

#### **SUMMARY SHEET**

	Carrana	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
	<u>Coverage</u>	volume (minois)	Change (+ of -)
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage	<del></del>	
۷.	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		· · · · · · · · · · · · · · · · · · ·
6.	Fidelity	<del></del>	
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage	· · · · · · · · · · · · · · · · · · ·	
11.	Inland Marine		
12.	Homeowners	\$136,576,703	19.9%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f Appli	iling only apply to certain territory (ties to all territories/classes.	erritories) or certain classes? If so, specify:	
Brief d	lescription of filing. (If filing followsion to base rates.	s rates of an advisory organization, specify o	organization):
IXC VIS	non to dase fates.		<del></del>
	justed to reflect all prior rate change	00	
* A		a).	
** Ch	nange in Company's premium level was sult from application of new rates.		

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DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

JAN 2 2 2008

SPRINGFIELD, ILLINOIS

Illinois Farmers Insurance Company

Name of Company

Joshua Taub - Product Manager
Official - Title

H29219D

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective <u>January 1, 2008.</u>

REC	EIV	ED
JAN 1	L 0 200	08

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1 Automobile Liability		
Private Passenger		
Commercial		
2 Automobile Physical Damage		
Private Passenger		
Commercial		<del></del>
3 Liability Other Than Auto		<u> </u>
4 Burgulary and Theft		
5 Glass		<del></del> :
6 Fidelity		
7 Surety		
8 Boiler and Machinery		
9 Fire		
10 Extended Coverage		
11 Inland Marine		
12 Homeowners	875,000	5%
13 Commercial Multi-Peril		
14 Crop Hail		
15 Worker's Compensation		
16 Other		
Line of Insurance		
Does filing only apply to certain territory (territories	s) or certain classes?	
If so, specify: No, all territories rates have changed - sor	me increased and some decrease	0
		<del></del>
Brief description of filing. (if filing follows rates of a	in advisory	
organization, specify organization):		
Base rates remain the same as the last filing. We have change	ed to the territory factors as listed	on the attached
sheet. We will also be writing liability.	· · · · · · · · · · · · · · · · · · ·	<del></del>

\* Adjusted to reflect all prior rate changes

\*\* Change in Company's premium level which will result from application of new rates.

Mt Cauch Mitual

Name of Company

Sucia Michig Sec Buas

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	02/04/08
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
<ul><li>7. Surety</li><li>8. Boiler and Machinery</li></ul>		<del></del>
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$5,199,424	-4.1% ·
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
15. Other Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	
Brief description of filing. (If filing follo Homeowners with Auto	ws rates of an advisory organization, spec	cify organization): Portfolio Discount:
	the eff	
*Adjusted to reflect all prior rate changes **Change in Company's premium level v	which will result from application of new rates	
		: Indemnity Company Name of Company
	'	Name of Company
	Fra	an Muldoon, AVP
	<del>"</del>	Official - Title

New Discount

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

JAN 1 0 2008

SPRINGFIELD, ILLINOIS

Form	(RF-3)
1 01111	1171 -01

#### **SUMMARY SHEET**

	Change in Company's premium of	or rate level produced by ra	ate
	revision effective 04/01/2008	,	
	(1)	(2)	(3)
	(-)	Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
	<u>-0010/4g0</u>		
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	DIVISION OF INSU	RANCE
	Commercial	STATE OF ILLINOIS/I	ED
3.	Liability Other Than Auto		
<b>4</b> .	Burglary and Theft	IAN 1 4 200	18
5.	Glass	JAN 14 LOV	
6.	Fidelity		
7.	Surety	SPRINGFIELD, IL	LINOIS
8.	Boiler and Machinery	Of Till Control	
9.	Fire		
	Extended Coverage Inland Marine		
	Homeowners	\$0	0.00%
		Φ0	0.0076
	Comercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
_	Biting out a substantial to the substantial and the substantia	ماملات و مادولات دار	
	oes filing only apply to certain territor	y (territories) or certain	
ÇI	asses? If so, specify: No		
_			
	wint donomination of films. (It films tollby	on rates of an advisor.	$\neg$
	rief description of filing. (If filing follow		, in Illinois
O	rganization, specify organization):	initial Homeowners Filing	in illinois
_			
*	Adjusted to reflect all prior rate chan		
**	•	_	
	Change in Company's premium leve	a which will	
	result from application of new rates.		
		ا اجائلت	Direct Incurance Company
		<u> Unitrin</u>	Direct Insurance Company
			Name of Company
And a		George Meksik	Senior Associate., Actuarial
7		George Oleksik.	Como Associate., Actuallal

Official - Title

## ILLINOIS DEPARTMENT OF INSURANCE

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective		02/04/08
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery     Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$10,606,525	-3.2%
13. Commercial Multi-Peril	<b>V</b> 10,000,020	
14. Crop Hail		
15. Other		
15. Other Line of Insurance		<del></del>
	(territories) or certain classes? If so, specify	:
	ows rates of an advisory organization, spe	
*Adjusted to reflect all prior rate change **Change in Company's premium level	es. which will result from application of new rates	<b>5</b> .
	Vigilar	nt Insurance Company
	Name of Company	
		• •
	Fr	an Muldoon, AVP
	<del></del>	Official – Title

New Discount

